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=> d his

     (FILE 'HOME' ENTERED AT 10:52:00 ON 28 JUN 2001)
     FILE 'CA' ENTERED AT 10:52:06 ON 28 JUN 2001
L1   4258 S CLHB OR BLOOD(2A)SUBSTITUT? OR HBOC OR(CROSSLINK? OR CROSS LINK?)
          (2A)(HB OR HEMOGLOB? OR HAEMOGLOB?)
L2     77 S L1 AND INTERFER?
L3     39 S L2 NOT PY>1996
L4      5 S L2 NOT L3 AND PATENT/DT
L5     44 S L3-4
     FILE 'MEDLINE' ENTERED AT 10:55:43 ON 28 JUN 2001
L6     26 S L3
     FILE 'BIOSIS' ENTERED AT 10:56:00 ON 28 JUN 2001
L7     19 S L3
     FILE 'CA, MEDLINE, BIOSIS' ENTERED AT 10:56:28 ON 28 JUN 2001
L8     66 DUP REM L5 L6 L7 (23 DUPLICATES REMOVED)

=> d l8 bib,ab 1-66

L8   ANSWER 9 OF 66  MEDLINE
AN   96409702     MEDLINE
TI   Selective determination of chloride and bromide ions in serum by cyclic
     voltammetry.
AU   Arai K; Kusu F; Noguchi N; Takamura K; Osawa H
CS   School of Pharmacy, Tokyo University of Pharmacy and Life Science, 1432-1
     Horinouchi, Hachioji, Tokyo, 192-03, Japan.
SO   ANALYTICAL BIOCHEMISTRY, (1996 Aug 15) 240 (1) 109-13.
AB   Voltammetric determination of chloride and bromide ions in serum was made
     using a one-body type Ag electrode, whose surface was covered with a
     dialysis membrane for preventing interference from proteins. This
     determination was based on measurement of the charge of the reduction wave
     of silver halide formed on the Ag electrode surface in a halide ion
     solution during a cathodic potential sweep. In this method, depending on
     the potential sweep range, the charge of the reduction wave of AgI, AgI +
     AgBr, or AgI + AgBr + AgCl can be measured. Here, the method was used to
     determine the chloride and bromide ions in artificial serum. Linear
     concentration ranges were 1.0 x 10(-2)-2.4 x 10(-1) M for chloride ions and
     5.0 x 10(-3)-1.8 x 10(-2) M for bromide ions. The correlation coefficient
     was 0.999 in each case. The relative standard deviation for chloride ion
     (1.0 x 10(-1) M) was 1.9% (n = 10), and that for bromide ion (1.5 x 10(-2)
     M) was 2.5% (n = 10). Bromide ions at a relatively high concentration as
     the component of serum had no effect on the determination of the chloride
     ion in the serum. This method is thus useful for the selective
     determination of chloride and bromide ions in serum.

L8   ANSWER 11 OF 66  MEDLINE
AN   96101281     MEDLINE
TI   Artificial icteric plasmas: unreliable indicators for interference with
     creatinine assay on Beckman CX3.
AU   van't Sant P; Kreutzer H J
CS   Lab. of Clin. Chem., Bosch Medicentrum,'s-Hertogenbosch, The Netherlands.
SO   CLINICAL CHEMISTRY, (1995 Dec) 41 (12 Pt 1) 1773-4.

L8   ANSWER 19 OF 66  BIOSIS  COPYRIGHT 2001 BIOSIS
AN   1993:403890  BIOSIS
TI   Modification of clinical chemistry methods to overcome interferences from
     diaspirin crosslinked hemoglobin (DCLHb.
AU   Leissing, Nancy; Mattia-Goldberg, Cynthia; Oskroba, Diana
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CS Baxter Healthcare Corp., Round Lake, IL 60073 USA
SO Clinical Chemistry, (1993) Vol. 39, No. 6, pp. 1144. Meeting Info.: 45th National Meeting of the American Association for Clinical Chemistry, Inc. New York, New York, USA July 11-15, 1993 ISSN: 0009-9147.

L8 ANSWER 20 OF 66 BIOSIS COPYRIGHT 2001 BIOSIS
AN 1993:403884 BIOSIS
TI Modification of hematology methods to overcome interferences from diaspirin crosslinked hemoglobin (DCLHb.
AU Leissing, Nancy; Mattia-Goldberg, Cynthia; Balma, Diane
CS Healthcare Corp., Round Lake, IL 60073 USA
SO Clinical Chemistry, (1993) Vol. 39, No. 6, pp. 1142. Meeting Info.: 45th National Meeting of the American Association for Clinical Chemistry, Inc. New York, New York, USA July 11-15, 1993 ISSN: 0009-9147.

L8 ANSWER 21 OF 66 BIOSIS COPYRIGHT 2001 BIOSIS
AN 1993:403822 BIOSIS
TI Hemoglobin based blood substitutes: Interference with routine chemical tests.
AU Christenson, Robert H.; Gregory, Linda C.; Duh, Show-Hong; MacKenzie, Colin; Trump, Benjamin F.
CS Dep. Pathol. Anesth., University Maryland Sch. Med., Baltimore, MD 21201 USA
SO Clinical Chemistry, (1993) Vol. 39, No. 6, pp. 1129. Meeting Info.: 45th National Meeting of the American Association for Clinical Chemistry, Inc. New York, New York, USA July 11-15, 1993 ISSN: 0009-9147.

L8 ANSWER 32 OF 66 CA COPYRIGHT 2001 ACS
AN 113:146775 CA
TI Interference in endotoxin and fungal polysaccharide assays from blood products and antimicrobial agents
AU Ikemura, Katsumi; Tanaka, Hiroshi; Yoshioka, Toshiharu; Sugimoto, Tsuyoshi
CS Med. Sch., Osaka Univ., Osaka, 553, Japan
SO Rinsho Byori (1990), 38(1), 87-92
AB A conventional chromogenic Limulus test (CCLT, normal plasma value: <10 pg/mL) detects both of endotoxin and β-1,3-glucan, while a chromogenic endotoxin-specific test (EST: <3 pg/mL) detects only endotoxin. Two sources of pseudo-pos. result in CCLT and/or EST were studied; (1) factor G-activating material found in blood products, which is indicative of fungal infections, and (2) interaction in diazo-coupling process of the tests by antibiotics or sulfonamides. CCLT and EST values obtained from 13 vials of blood products including human albumin, antithrombin III, and antihemophilic globulin were 284.6 pg/mL and 20.2 pg/mL, resp. High CCLT values accompanied by low EST values indicate factor G-activating material in the blood products rather than endotoxin. Sample blanks of 32 plasma specimens obtained from 19 patients were 23.7 pg/mL by CCLT and 19.2 pg/mL by EST. All the patients were administered sulfamethoxazole/trimethoprim (SMX/TMP), aztreonam (AZT), ceftazidime (CAZ), imipenem/cilastatin (IPM/CS), or silver sulfadiazine. SMX/TMP, AZT, CAZ, IPM/CS, and cefmenoxime were demonstrated to react with the diazo-coupling reagents used in CCLT and EST, and to cause false-pos. result in the tests. Thus, the investigation of blood product and sample blank is required for the assay of endotoxins or fungal polysaccharides using CCLT and EST.

L8 ANSWER 49 OF 66 MEDLINE
AN 84020957 MEDLINE
TI Effects of Fluosol-DA (artificial blood) on clinical chemistry tests and instruments.

AU Mullins R E; Hutton P S; Conn R B
SO AMERICAN JOURNAL OF CLINICAL PATHOLOGY, (1983 Oct) 80 (4) 478-83.
AB Artificial blood must be added to the list of therapeutic agents that produce interference with diagnostic laboratory tests. Fluosol-DA (Alpha Therapeutic Corp., Los Angeles, CA), a stable 20% emulsion of perfluorocarbons in aqueous medium, is being evaluated in clinical trials as a blood substitute in the United States. We investigated its effects in blood and serum samples on test results and instruments in the clinical chemistry laboratory. The 20% emulsion was added to blood or serum specimens in amounts corresponding to the replacement of in-vivo plasma volumes of 10-50%, concentrations that would be expected in blood samples obtained from patients who have received Fluosol. Observed interferences mimicked those caused by high triglyceride concentrations in serum specimens: interference with chemical reactions and generation of spurious absorbance readings because of turbidity. These types of errors are often additive, and the cumulative effect may cause either erroneously high or low values for the analytes concerned. Because Fluosol may be used widely, although infrequently, for patients refusing blood transfusions on religious grounds and for patients with rare antibodies to red blood cells who require transfusion, laboratories analyzing specimens containing Fluosol should be aware of the potential errors.

RBC, 83

L8 ANSWER 62 OF 66 CA COPYRIGHT 2001 ACS
AN 70:84799 CA
TI Effects of drugs on laboratory values
AU Lubran, Myer
CS Univ. of Chicago, Chicago, Ill., USA
SO Med. Clin. N. Amer. (1969), 53(1), 211-22
AB This review consists primarily of listings of drugs affecting clin. lab. results, together with minimal comments relative to the means whereby these effects are achieved. Included are drugs interfering with test procedures, with the activity of anticoagulants, with thyroid function tests, with liver function tests, drugs inducing liver microsomal enzymes, drugs affecting porphyrin metabolism, drugs inducing blood dyscrasias, drugs acting on the central nervous system, analgesics, autonomic drugs, hypotensive agents, diuretics, chemotherapeutic and antibiotic agents, antifungal and antiprotozoal drugs, blood and blood substitutes, gastrointestinal drugs, vitamins, hormones and substitutes, cholesterol-lowering drugs, and misc. 5 references.

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STN INTERNATIONAL LOGOFF AT 10:57:50 ON 28 JUN 2001